CEDA POTENTIAL HAZARDOUS WAS		REGION SITE NUMBER									
TENTATIVE DISPOSIT		6 TX 6785									
File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.											
I. SITE IDENTI											
W. J. SMITH WOOD PRESERVING	D. STATE E. ZIP CODE										
DENISON	<u> </u>	X		75030							
II. TENTATIVE DISPOSITION  Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.											
indicate the recommended action(s) and agency(les) that should be	ACTION AGENCY										
RECOMMENDATION	MARK'X'	EPA	STATE LOCAL PRIVATE								
A. NO ACTION NEEDED NO HAZARD	X				223						
B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.)											
C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.)											
ENFORCEMENT ACTION NEEDED (if yes, specify in Part E whether the contract of t	ent action										
E. RATIONALE FOR DISPOSITION SITE IS AN ACTIVE	W000 F	RESERUI	NE F	ACILITY	٧,						
TOWR HAS RECEIVED A CLOSORE PLAN FOR SITE AND IT INCLUDES EXCANATION											
SOCIOIFICATION AND OFF-SITE DISPOSA	AL OF	CREDSO	TE BO	nom	JEDIM.	EN 8.					
HOWEVER EPA IS WAITING FOR STATE FAME CERTIFICATION OF FINAL											
CLOSURZ COMPLIANCE											
F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION  G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE  (mo., day, & yn.)  G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE  ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED											
(mo., day, & yr.)											
H. PREPARER INFORMATION											
1, NAME  1, NAME  2. TELEPHONE NUMBER  3. DATE (mo., day, & yr.)  (214) 767-9701  10-4-84											
III. INVESTIGATIVE											
A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FIN	AL DISPOSITIO	3N									
	•										
B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)	<del>T</del>	<del>-  </del> -									
2. SCHEDULED 3. TO BE DATE OF PERFORMED BY ACTION (EPA, Con-NEEDED ADDITIONAL INFO. (mo, day, & yr) (tractor, State, etc.)	4. ESTIMATED MANHOURS		S. REMARKS								
a. TYPE OF SITE INSPECTION	1		<del> </del>								
(1)	<u> </u>			<del></del>							
(2)											
(3)											
b. TYPE OF MONITORING						-					
	+		• •								
(2)				, <u>-</u>	. 40						
C. TYPE OF SAMPLING				1740 	)42 #						
	<del> </del>	<u> </u>									
(2)				·	***** ****** (18) (64)						

III. INVESTIGATIVE	ACTIVITY	NEEDED at	nd PART	B-PROF	OSED INVES	FIGATIVE	ACTIVIT	TY (Continued)		
d. TYPE-OF LAB ANALYSIS								1		
		· -		<del> </del>	_  _	_ · _		بست. حسد حسد		
(2)										
e. OTHER (specify)										
				4 —	_  _					
(2)	_					-		<u> </u>		
C. ELABORATE ON ANY OF THE II INVESTIGATIVE WORK.	NFORMATIO	N PROVIDED	IN PART E	3 (on troi	it & above) AS N	EEDED T	OIDENTIF	Y ADDITIONAL		
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			*	-	. ·	<b>A</b> .		· - · · ·		
D. ESTIMATED MANHOURS BY ACT										
1. ACTION AGENCY	2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE				1. ACTION A	GENCY		2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE		
a. EPA		ACTIVITI	<del></del>	b. STA	b. STATE			ACTIVITIES		
c. EPA CONTRACTOR	-			.d. 0TF	HER (specify)	ER (specify)				
		IV.	REMEDIA	L ACT	IONS					
A. SHORT TERM/EMERGENCY STR strict access, provide alternate w	RATEGY (On later supply,	Site & Off-Site	e): List all	l emerger	ncy actions need	led to bring ach of the	site under actions to	immediate control, e.g., re- be used in the space below.		
I	Z. EST.	3. EST.	4.				T			
1. ACTION	START DATE	END DATE (mo,day,&yr)	ACTION AC (EPA, St. Private P	ate,			INDICA	ECIFY 311 OR OTHER ACTION: DICATE THE MAGNITUDE OF THE WORK REQUIRED		
					s					
					s			*		
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					\$					
					\$					
					\$					
B. LONG TERM STRATECY (On Sit See instructions for a list of Key	e & Off-Site): Words for eac	List all lon	g term solu ons to be us	tions, e.g	g., excavation, r spaces below.	emoval, gr	ound water	monitoring wells, etc.		
,	2.EST. START	3. EST.	4.				6. 90001	FY 311 OR OTHER ACTION;		
1. ACTION	DATE	DATE (mo,day,&yr)	(EPA, S	State	5. ESTIMATE	D COST	INDICA	FY 311 OR OTHER ACTION; ATE THE MAGNITUDE OF HE WORK REQUIRED		
					s					
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		,			s					
					s					
C. ESTIMATED MANHOURS AND C	OST BY ACT	TION AGENC	Υ .		_ <del></del>					
2. TOTAL EST. MANHOURS FOR	3. TOTAL	EST. COST	1.	ACTION	AGENCY	2. TOTAL EST MANHOURS FO REMEDIAL ACTIVITIES		R 3. TOTAL EST. COST		
AGENCY ACTIVITIES	REMEDIAL	ACTIVITIES	S b. STATE		ACTIVITIE		THES	REMEDIAL ACTIVITIES		
c. PRIVATE			d. 01	THER (SP	ecily)			·		